MO. OF COPIES RECEIVED		•	•	•	Form C-1	03
DISTRIBUTION		•			Supersed	es Old
SANTA FE	NEW MEXI	CO OIL CONS	ERVATION CO	MMISSION	C-102 and Effective	
FILE .				•		
U.S.G.S.					5a. Indicate	Type of Lease
LAND OFFICE				•	State	Fee 🔀
OPERATOR				•	5. State Oil	& Gas Lease No.
		· · · · · · · · · · · · · · · · · · · 	·^			
SUNDR (DO NOT USE THIS FORM FOR PRO-	Y NOTICES AND RIPOSALS TO DRILL OR TO DRILL OR TO DRILL OR TO DRIVE OR FORM	EPORTS ON FLUG B	WELLS ACK TO A DIFFER H PROPOSALS.)	ENT RESERVOIR.		
1. OIL GAS WELL WELL	OTHER-	DRY HO	, _		7. Unit Agree	ment Name
2. Name of Operator					8. Form or L	ease Name
AMOCO PRODUCTION COM 3. Address of Operator					J. L. Roo 9. Well No.	ed Estate
BOX 367, ANDREWS,	TEXAS 79714				3 /	
4, Location of Well UNIT LETTER	980 FEET FROM TH	SOUTH	LINE AND	980 FEET	FROM Willi	i Pool, or Wildcat
THE East LINE, SECTION	on <u>3</u> town	SHIP 15-	S RANGE	35-E .	MPM (
	15. Elevation		DF, RT, GR, etc G L	:.)	12. County	
16. Check	Appropriate Box To			ice, Report o	r Other Data	
NOTICE OF IN	TENTION TO:			SUBSEQU	JENT REPORT	OF:
PERFORM REMEDIAL WORK	PLUG ANI	ABANDON 🔀	REMEDIAL WOR	·]	LTERING CASING
TEMPORARILY ABANDON			COMMENCE DRI	LLING OPNS.	PL	UG AND ABANDONMENT
PULL OR ALTER CASING	C HANGE	PLANS	CASING TEST A	O CEMENT JOB]	
			OTHER			
OTHER						
17. Describe Proposed or Completed Op	perations (Clearly state a	ll pertinent deta	ils, and give pe	rtinent dates, incl	uding estimated date	of starting any proposed
work) SEE RULE 1103.						
Well was TA plugged bac	y to 1530	7' 701	alu	2 PMIN	interv	zl
4703-4357: (856" ASD	. 10%	1500 5		, , , , , ,	• •
103-4351.	078 CSA 4	1040 ay	75000	k . <i>J</i>		
Propose to Pi	a as fol-	eous.		, <u>-</u>	,	
- Cut é Pull - Spot 100 Co - all interval - Make Juni	878 Cao	ing fr	om f	ru-porn	et,	
· 5por 100 0	men pri	ig un	e out	of su	11. 12. C123	W" a a a a a a
- 11 10 Sv		1 gron	apper	5/2-2	1 2 (10)	8 CSA 362')
- all interior	en to be 1	100 20	wjuce	i nees	· 104 17/1/	nacker
- make time	al all ports	acea o	y mi	Lagati	1 -2 1	
max groves		7	evec	/ CO COG 2 (or.	
	•					
\sim						
18. I hereby gertify that the information	above is true and comple	te to the best o	f my knowledge	and belief.		
	1.				л	
SIGNED BY GOR	Kum	TITLE ADMI	NISTRATIVE	ASSISTANT	<u>AP</u>	R 1 0 1975
NA-NMOCOLH)	Orig. Signed By				<u> </u>	DV *
APPROVED AY	Joe D. Ramey	TITLE			DATE	
CONDITIONS OF APPROVAL, IF ANY	Bist. I, Supv.	•				

REDUKED

X2, 11 (13

CAL CORSEGNATION COMMA.